Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C					ssification	Population	Owner Type	Primary Source
CT0820051	POWDER RIDGE SKI LODGE-MAIN BLDG				NTNC	100	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
99 POWDER HIL	L ROAD	Connections			2			

Towns Served: MIDDLEFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		Complete
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		Complete
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19	1/1-12/31	Waiver
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Schedule Generation Date: 4/11/2019

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name CI					ssification	Population	Owner Type	Primary Source
CT0820051	POWDER RIDGE SKI LODGE-MAIN BLDG				NTNC	100	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
99 POWDER HILL ROAD		Connections			2			

Towns Served: MIDDLEFIELD

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Water System Facility. ENTRY POINT (WSF ID. 00700)			
Organic Chemicals (VOCS)		1 rc	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

Other Compliance Schedules

Compliance Schedule Activity Due Date Achieved Date

CROSS CONNECTION SURVEY REPORT 3/1/2024

		•	, , ,			<u>'</u>			
Water					Total	Lead and			
System	Water System Facility		Sampling Point		Coliform				Stage
Facility IE		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		PR-2FHS1	2ND FL HAND SINK 1	Α	Υ	N			
		PR-2FHS2	2ND FL HAND SINK 2	Α	Υ	N			
		PR-2FM	2ND FLOOR MENS RM	Α	Υ	N			
		PR-2FW	2ND FLOOR WOMENS RM	Α	Υ	N			
		PR-BHS1	BAR HAND SINK 1	Α	Υ	N			
		PR-HS1	HAND SINK #1	Α	Υ	N	Υ		
		PR-HS2	HAND SINK #2	Α	Υ	N	Υ		
		PR-HS3	HAND SINK #3	Α	Υ	N	Υ		
		PR-MRL	MENS ROOM LEFT SINK	Α	Υ	N			
		PR-MRR	MENS ROOM RIGHT SINK	Α	Υ	N			
		PR-POTS	POT SINK	Α	Υ	N			
		PR-PROD	PRODUCE SINK	Α	Υ	N			
		PR-WRC	WOMENS ROOM CENTER S	Α	Υ	N			
		PR-WRL	WOMENS ROOM LEFT SIN	Α	Υ	N			
		PR-WRR	WOMENS ROOM RIGHT	Α	Υ	N			
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
22989	MAIN LODGE ARTESIAN WELL	2	WELL 1	Α					

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WA	TER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
RADICCHI, PAUL J.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2021

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department of Public Health Drinking Water Section										
Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source			
CT0820051		NTNC	100	Р	GW						
Local Address (where applicable) Service Re				ntial	Commerci	al Industria	al Combine	ed Agricultural			

99 POWDER HILL ROAD

Certified Operator Information

Connections

2

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM

Operator Name

Operator Type

Certification(s)

Expiration

WATER TREATMENT PLANT OPERATOR - CLASS II									
				Contact Inf	ormation				
Name				Organization	l			Job Title	
Mr. Sean Hayes Powdr Ridge Mtn Prk&Resort,LLC						Owner			
Mailing Address Lin	e One		Mailing	Address Line Two	ress Line Two			State	Zip Code
161 Brownstone Av	enue					Portland		СТ	06480
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address			
860-918-3092		860-342-	5017			shayes@brownstonepark.com			

Contact Role(s): Administrative Contact, Legal Contact, Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C				Cla	ssification	Population	Owner Type	Primary Source
CT0820072 THE ROGERS MANUFACTURING COMPANY					NTNC	100	Р	GW
Local Address (v	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural	
72 MAIN STREET		Connections	1					

Towns Served: MIDDLEFIELD	-		
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate (1040)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Nitrite (1041)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)		Collection Period	Compliance Status
camping to the (camping to the 12)	Monitoring Period	Conection Period	compliance status
ENTRY POINT (3)	1/1/17 - 12/31/19	Collection Period	compnance status

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

THE ROGERS MANUFACTURING COMPANY Cornections Service Residential Commercial Industrial Combined Agricultural Zampling Point Complete											
PMUS Decided PMUS Name Classification Population Owner Type Primary Source Cro0820072 THE ROGERS MANUFACTURING COMPANY 100 P GW		Connecticut De	partment of	Public I	Health	Dri	inkin	g W	ater S	ection	
The ROGERS MANUFACTURING COMPANY		Water Q	uality Monit	oring an	d Com	ipli	ance	Sch	edule		
Service Connections Service Connections Tourns Served: MiloDLEFIELD	PWS ID	PWS Name	-			Class	ification	Popu	ulation Ov	vner Type	Primary Source
Connections 1 Connections 1 Connections 1 Connections Co	СТ0820072	THE ROGERS MANUFAC	TURING COMPANY			Ν	ITNC	1	.00	Р	GW
Monitoring Requirements Monitoring Requirements Monitoring Requirements	Local Address	(where applicable)		Service	Residen	tial	Commer	cial I	ndustrial	Combine	d Agricultural
Monitoring Requirements Water System Facility: ENTRY POINT (WSF ID: 00700)	72 MAIN STR	EET		Connections	1						
Water System Facility: ENTRY POINT (WSF ID: 00700) Organic Chemicals (VOCS) I routine (RT) per three years Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status ENTRY POINT (3) I routine (RT) per three years ENTRY POINT (3) I routine (RT) per quarter Sampling Point (Sampling Point ID) Monitoring Period Collection Period Complearer Sampling Point (Sampling	Towns Served	: MIDDLEFIELD									
Sampling Point (Sampling Point ID)				oring Req	uireme	nts					
Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/17- 12/31/19 1/1/20 - 12/31/22 Water System Facility: WELL (WSF ID: 10393) E. Coli (3014) Sampling Point (Sampling Point ID) Monitoring Period Sampling Point (Sampling Point ID) Monitoring Period Monitoring Period Monitoring Period Monitoring Period Monitoring Period Collection Period Compliance Status Complete 10/1/18 - 12/31/18 Complete 1/1/19 - 3/31/19 1/1/19 - 3/31/19 Complete 4/1/19 - 6/30/19 T/1/19 - 9/30/19 Compliance Schedule Activity Due Date 3/1/2020 Water System Facility and Sampling Point Investory Water System Facility Due Date 3/1/2020 Water System Facility and Sampling Point Investory Water System Facility Due Schedule Activity Sampling Point Due Schedule Activity Sampling Point Coliform Copper Status Rule Rule Rule Tier Asbestos WQP 2 DBPR DOWNSTREAM WITHIN 5 SERVICE CON A DOWNSTREAM WI	Water Syste	m Facility: ENTRY POINT	(WSF ID: 00700)								
ENTRY POINT (3) 1/1/17 - 12/31/19 1/1/20 - 12/31/22 Water System Facility: WELL (WSF ID: 10393) E. Coli (3014)	_	• •								· · · · · ·	-
Toutine (RT) per quarter Sampling Point (Sampling Point (ID) Monitoring Period Collection Period Compliance Status	_					_		Collect	tion Period	d Comp	liance Status
Name	ENTRY P	OINT (3)				-					
Coli 3014 Sampling Point (Sampling Poin					1/1/20 -	12/31	L/22				
WELL (2) 10/1/18 - 12/31/18 Complete WELL (2) 10/1/18 - 12/31/18 Complete 1/1/19 - 3/31/19 Complete 1/1/19 - 3/31/19 Complete 4/1/19 - 6/30/19 7/1/19 - 9/30/19 COTHER COMPLIANCE Schedules COMPLIANCE COMPLANCE COMPLIANCE COMPLIANCE COMPLIANCE COMPLIANCE COMPLIANCE COMPLANCE COMPLIANCE COMPLANCE COMPLANC	Water Syste	m Facility: WELL (WSF I	D: 10393)								
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1/1/19 - 3/31/19 Complete 4/1/19 - 6/30/19 7/1/19 - 9/30/19								Collect	tion Period		
Other Compliance Schedules CROSS CONNECTION SURVEY REPORT 3/1/2020 Water System Facility and Sampling Point Inventory Water System Facility ID 10 Description 1D Description 2D Descrip	WELL (2									C	omplete
Other Compliance Schedules Compliance Schedule Activity Due Date Achieved Date CROSS CONNECTION SURVEY REPORT Water System Facility and Sampling Point Inventory Water System Facility Due Date Achieved Date Water System Facility and Sampling Point Inventory Water System Facility Due Date Achieved Date Water System Facility and Sampling Point Inventory Water System Facility Sampling Point Sampling Point Coliform Copper Status Rule Rule Tier Asbestos WQP 2 DBPR Dound Distribution System 4 Distribution System Within 5 SERVICE CON A UPSTREAM WITHIN 5 SERVICE C										C	omplete
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System Water System Facility Sampling Point Description Sampling Point Description Status Rule Rule Tier Asbestos WQP 2 DBPR 00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION SYSTEM A Y V V V V V V V V V		Wate	r System Facili	ty and Sa	mpling	Poi	nt Inv	ento	ry		
Facility ID ID Description Status Rule Rule Tier Asbestos WQP 2 DBPR Rule Rule Tier Asbestos WQP 2 DBPR A Y DOWNSTREAM DOWNSTREAM WITHIN 5 SERVICE CON A UPSTREAM WITHIN 5 SERVICE CON A DOWNSTREAM DOWNSTREAM WELL DA DA DA DA DESCRIPTION DISTRIBUTION SYSTEM DISTRIBUTION SYSTEM DISTRIBUTION SYSTEM OPERATOR - CLASS III DISTRIBUTION SYSTEM											
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Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Facility Classification: SMALL WATER SYSTEM Operator Name Operator Type Certification(s) HELMING, TRAVIS CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 9/30/2019 WATER TREATMENT PLANT OPERATOR - CLASS III 9/30/2019 BOLTE, LUTZ ASSIGNED OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS II 9/30/2020 DISTRIBUTION SYSTEM OPERATOR - CLASS II 9/30/2020 Contact Information	47792 U\	/ TREATMENT		_							
Facility Classification: SMALL WATER SYSTEM Operator Name Operator Type Certification(s) Expiration HELMING, TRAVIS CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 9/30/2019 WATER TREATMENT PLANT OPERATOR - CLASS III 9/30/2019 BOLTE, LUTZ ASSIGNED OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS II 9/30/2020 DISTRIBUTION SYSTEM OPERATOR - CLASS II 9/30/2020 Contact Information			Certified	Operator	Inform	atio	n				
Operator Name Operator Type Certification(s) Expiration HELMING, TRAVIS CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 9/30/2019 WATER TREATMENT PLANT OPERATOR - CLASS III 9/30/2019 BOLTE, LUTZ ASSIGNED OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS II 9/30/2020 DISTRIBUTION SYSTEM OPERATOR - CLASS II 9/30/2020 Contact Information	Water Syste	m Facility: DISTRIBUTIO	N SYSTEM (WSF II	D: 00600)							
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WATER TREATMENT PLANT OPERATOR - CLASS III 9/30/2019 BOLTE, LUTZ ASSIGNED OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS II 9/30/2020 DISTRIBUTION SYSTEM OPERATOR - CLASS II 9/30/2020 Contact Information	Operator Nai	ne	Operator Type	e C	Certificatio	n(s)					Expiration
ASSIGNED OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS II 9/30/2020 DISTRIBUTION SYSTEM OPERATOR - CLASS II 9/30/2020 Contact Information	HELMING, TR	AVIS	CHIEF OPERATO	DR D	ISTRIBUTI	ON SY	STEM O	PERAT	OR - CLAS	S III	9/30/2019
DISTRIBUTION SYSTEM OPERATOR - CLASS II 9/30/2020 Contact Information				V	VATER TRE	ATM	ENT PLA	NT OPE	ERATOR - 0	CLASS III	9/30/2019
Contact Information	BOLTE, LUTZ		ASSIGNED OPER	RATOR V	VATER TRE	ATM	ENT PLA	NT OPE	ERATOR - 0	CLASS II	9/30/2020
				D	ISTRIBUTI	ON SY	STEM O	PERAT	OR - CLAS	S II	9/30/2020
Name Organization Job Title			Con	tact Infor	mation						
	Name		Oı	ganization						Job Title	

860.246.8648
NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements.
Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Mailing Address Line Two

Mobile Phone

PO Box 155

Fax

The Rogers Manufacturing Co.

Hr Manager

State

СТ

Zip Code

06481

City

Rockfall

Emergency Phone Email Address

Ms. Elizabeth Bitel

Business Phone

72 Main St

Mailing Address Line One

Extension

CT0820072 THE ROGERS MANUFACTURING COMPANY Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural			P					,			
CT0820072THE ROGERS MANUFACTURING COMPANYNTNC100PGWLocal Address (where applicable)ServiceResidentialCommercialIndustrialCombinedAgricultural72 MAIN STREETConnections1IndustrialCombinedAgricultural		Wate	er Quality M	Ionitoring and	d Con	npl	liance S	Schedul	le		
Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 1	PWS ID PWS Name						ssification	Population	Owner Type	Pri	mary Source
72 MAIN STREET Connections 1	CT0820072			NTNC	100	Р		GW			
72 MAIN STREET	Local Address (w	here applicable)		Service	Residen	tial	Commerci	al Industri	al Combin	ed	Agricultural
Towns Served: MIDDI FFIFI D	72 MAIN STREET Connection										
				·				·	·		
800-340-8048 EDITE:[@TITLE1891.com	000-240-0040)					enitei	<u>@1111C1031.C</u>	OITI		

Connecticut Department of Public Health Drinking Water Section

Contact Role(s): Administrative Contact, Legal Contact, Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0820172	COOPER-ATKINS CORP				NTNC	86	Р	GW
Local Address (v	vhere applicable)	Service	Resider	itial	Commercia	al Industri	al Combine	ed Agricultural
33 REEDS GAP R	OAD	Connections			1			

Towns Served: MIDDLEFIELD			
Monitorin	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
• •	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Departn	nent of Public H	lealth D	rinking	Water	Section	ì
	Water Quality	Monitoring and	d Comp	liance S	Schedul	e	
PWS ID PWS Name Classification Population Owner Type Primary							
CT0820172 COOPER-ATKINS CORP NTNC 86 P							
Local Address ((where applicable)	Service	Residential	al Combin	ed Agricultural		
33 REEDS GAP	ROAD	Connections		1			
Towns Served:	MIDDLEFIELD					·	
		Monitoring Requ	iirement	S			
Water System	n Facility: ENTRY POINT (WSF I	D: 00700)					
Organic Cher	micals (VOCS)					1 routine	(RT) per year
Sampling	Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu					
ENTRY PO		1/1/18 - 12/31/18 Complete					
			1/1/19 - 12/	/31/19			
			1/1/20 - 12/	/31/20			

Compliance Schedule ActivityDue DateAchieved DateCROSS CONNECTION EXEMPTION3/1/2020

Water System Facility and Sampling Point Inventory Water Lead and System Water System Facility Sampling Point Sampling Point Coliform Copper Stage Facility ID **Description** ID Rule Rule Tier Asbestos WQP 2 DBPR Status 00600 DISTRIBUTION SYSTEM 4 **DISTRIBUTION SYSTEM** Υ COOPER001 CAFETERIA Α Υ 2 Υ 2 COOPER002 LADIES RESTROOM Υ Υ COOPER003 MENS RESTROOM Υ 2 Α Υ 2 COOPER004 FIRST AID Υ Υ Α COOPER005 MAINTENANCE Υ 2 Υ COOPER006 **MDPARTS** Υ 2 Υ COOPER007 **MECHANICAL** Α Υ Υ COOPER008 BRAZE Υ 2 Υ Α DOWNSTREAM WITHIN 5 SERVICE CON Α UPSTREAM WITHIN 5 SERVICE CON Α 00700 ENTRY POINT **ENTRY POINT** Α 10394 WELL 2 WELL Α

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL W.	ATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
LEMAY, REALE D.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	12/31/2019
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2020
KILBOURN, ERIC	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2019
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2019

				Contact Info	ormation				
Name				Organization				Job Title	
Mr. John Rakowski				Cooper Instru	ument Corp		Supervisor		
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code
33 Reeds Gap Road						Middlefi	eld	СТ	06455
Rusiness Phone	Extension	Fax		Mohile Phone	Emergency Phone	Fmail Ad	dress		

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C	Connectic	ut Depa	rtme	ent of	Public	Health	Drir	ıking	Water	Secti	on	
	Wa	ter Qua	lity N	Ionite	oring ai	nd Con	nplia	nce S	chedul	le		
PWS ID P	/S ID PWS Name								Population	Owner T	ype P	rimary Source
CT0820172 COOPER-ATKINS CORP							NT	NC	86	Р		GW
Local Address (where applicable)						Resider	ntial Co	mmercia	al Industri	al Com	bined	Agricultural
33 REEDS GAP ROAD					Connection	ıs		1	1			
Towns Served: MI	DDLEFIELD									'		
860-894-4396	1-894-4396 860-349-8994 203-687-7467 jrakowski@cooper-atkir							-atkins.co	m			
Contact Role(s):	Administrative	Contact										
Name				Or	ganization					Job	Title	
Ms. Carol P. Walla	асе			Co	oper-Atkins	Corp.			President	And Ceo		
Mailing Address Li	Mailing Address Line One Mailing Address Line Two								City	St	ate	Zip Code
33 Reeds Gap Roa	d							Middle	field	(Т	06455
Business Phone	Extension	Fax		Mobil	e Phone	Emergency	/ Phone	Email A	ddress	·	·	
860-894-4440		860-349-3	3014			860-558	-5458	cwallac	e@cooper-	atkins.coi	n	
Contact Role(s): I	Legal Contact, (Owner			,			•				

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name CI					ssification	Population	Owner Type	Primary Source
CT0820362	MIDDLEFIELD FEDERATED CHURCH				NTNC	30	Р	GW
Local Address (\	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural	
390 MAIN STRE	ET	Connections			1			

Towns Served: MIDDLEFIELD			1
Monitori	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	00600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

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CO.	nnecticut Department of F		<u> </u>	Zuon
	Water Quality Monitor			
	Name		tion Population Own	er Type Primary Source
T0820362 MID	DLEFIELD FEDERATED CHURCH	NTNO	30	P GW
ocal Address (where			mercial Industrial (Combined Agricultura
90 MAIN STREET	C	onnections	1	
owns Served: MIDD	LEFIELD			
	Monitor	ing Requirements		
Vater System Facil	ity: ENTRY POINT (WSF ID: 00700)			
Organic Chemicals	s (VOCS)		1 routine	(RT) per three years
Sampling Point	(Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
		1/1/19 - 12/31/21		
		1/1/22 - 12/31/24		
Vater System Facil	ity: WELL #1 (WSF ID: 10762)			
E. Coli (3014)			1 rout	ine (RT) per quarter
Sampling Point	(Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL #1 (2)		10/1/18 - 12/31/18	}	Complete
		1/1/19 - 3/31/19		Complete
		4/1/19 - 6/30/19		
		7/1/19 - 9/30/19		
	Monthly Water System Facility	(WSF) Level Monitor	ring Requiremen	its
	ity: ENTRY POINT (WSFID: 00700)	, , ,		
Analyte	Monitoring Requirement (Summary	Type) Operating Lim	nit S	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0		4
Start Date: 10/1		Compliance History:	Operating Limit	Monitoring
	,	Monitoring Period	Compliance Status:	Compliance Status:
		11/1/2018 - 11/30/2018		 N
		12/1/2018 - 12/31/2018		N
		1/1/2019 - 1/31/2019		N
		2/1/2019 - 2/28/2019		N
		3/1/2019 - 3/31/2019		_
		4/1/2019 - 4/30/2019		
Analyte	Monitoring Requirement (Summary		nit S	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Maximum: 7.		4
Start Date: 10/1	, , ,	Compliance History:		Monitoring
Start Bate. 10/1	,2010	Monitoring Period	Operating Limit Compliance Status:	Compliance Status:
		11/1/2018 - 11/30/2018	compnance status:	N
		12/1/2018 - 12/31/2018		N
		1/1/2019 - 1/31/2019		N
		2/1/2019 - 2/28/2019		N
		3/1/2019 - 3/31/2019		IN
		4/1/2019 - 4/30/2019		<u>_</u>
	Other Cor	npliance Schedules		
Compliance Cabadala		•	Anhina de)ata
Compliance Schedule	: ACLIVICY	Due Date	Achieved D	rate

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

12/29/2010

12/29/2011

3/1/2015

SUBMIT LEAD CONSUMER NOTICE CERTIFICATE

SUBMIT LEAD CONSUMER NOTICE CERTIFICATE

CROSS CONNECTION EXEMPTION

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name CI					ssification	Population	Owner Type	Primary Source
CT0820362	MIDDLEFIELD FEDERATED CHURCH				NTNC	30	Р	GW
Local Address (\	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural	
390 MAIN STRE	ET	Connections			1			

Public Notification Requirements										
Compliance Notice <u>Public Notification</u> <u>PN Certification</u>										
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received				
Water Quality Parameters - Basic M&R Violation	1/1/05 - 12/31/05	3	3/17/2010		3/27/2010					
Lead and Copper M&R Violation	1/1/10 - 12/31/10	3	3/20/2012		3/30/2012					

	Water System Facility and Sampling Point Inventory									
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos		tage DBPR	
00600	DISTRIBUTION SYSTEM	10002	WS2720-10	Α	Υ					
		10003	GENERATED BY BATCH	Α	Υ					
		10004	GENERATED BY BATCH	Α	Υ					
		10012	GENERATED BY BATCH	Α	Υ					
		10013	GENERATED BY BATCH	Α	Υ					
		20007	WS2720-33	Α	Υ					
		20008	GENERATED BY BATCH	Α	Υ					
		20010	GENERATED BY BATCH	Α	Υ					
		20011	DISTRIBUTION SYSTEM	Α	Υ					
		4	DISTRIBUTION SYSTEM	Α	Υ					
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α						
		UPSTREAM	WITHIN 5 SERVICE CON	Α						
00700	ENTRY POINT	3	ENTRY POINT	Α						
10762	WELL #1	2	WELL #1	Α						
46416	MIDDLEFIELD FEDERATED									

46416	MIDDLEFIELD FEDERATED
	TREATMENT STATION

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM Certification **Operator Name** Certification(s) **Operator Type Expiration** O'SHAUGHNESSY, WILLIAM J. CHIFF OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS II 6/30/2021

O STIAOGITIVESST, V	VILLIMIVI J.		CHIEF OF ENATOR WATER TREATMENT FERATOR - CEASS					CLASS II	0/30/2021
			Co	ontact Inf	ormation				
Name				Organization				Job Title	
Mr. Robert Newco	mb			Middlefield F	ederated Church		Administrati	ive	
Mailing Address Line One Mailing Addr				ress Line Two			City	State	Zip Code
102 Main Street			P. O. Box 200)		Middlefi	eld	СТ	06455
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ac	ldress		
860-349-9881					860-623-1979				
Contact Role(s): A	dministrative	Contact							

	Connecticut	•		itoring a			_			
PWS ID	PWS Name	1 Quu	iicy 141011	itoring a	na don	Classif		1	I .	Primary Source
CT0820362	MIDDLEFIELD FEDE			NT	NC	30	P	GW		
Local Address (v	vhere applicable)			Service	Resider	tial Co	mmerci	ial Industri	al Combine	ed Agricultural
390 MAIN STREET				Connection	ns		1			
Towns Served: N	ИIDDLEFIELD					'			'	
Name				Organization					Job Title	9
Middlefield Fed	erated Church Inc									
Mailing Address	Line One		Mailing Addr	ess Line Two				City	State	Zip Code
390 Main St & R	t 157						Middle	efield	СТ	06455
Business Phon	e Extension	Fax	Mo	bile Phone	Emergency	/ Phone	Email /	Address		
Contact Role(s)	Legal Contact Ow	nor								

- CD | I-l' - II - - I-l - D - ' - I - - - I-I-- - - C -

Please note the following:

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	<u> </u>							
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0820382	THE INDEPENDENT DAY SCHOOL				NTNC	199	Р	GW
Local Address (v	where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
LAUREL BROOK	ROAD	Connections	1					

Towns Served: MIDDLEFIELD			
Monitori	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		Complete
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		Complete
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

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Connecticut Department of Public Health Drinking Water Section	on
Water Quality Monitoring and Compliance Schedule	

	<u> </u>							
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0820382	THE INDEPENDENT DAY SCHOOL				NTNC	199	Р	GW
Local Address (v	where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
LAUREL BROOK	ROAD	Connections	1					

Monitoring Requirements							
Water System Facility: ENTRY POINT (WSF ID: 00700)							
Organic Chemicals (VOCS)		1 routi	ine (RT) per quarter				
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete				
	1/1/19 - 3/31/19		Complete				
	4/1/19 - 6/30/19		Complete				
	7/1/19 - 9/30/19						

Other Compliance Schedules

Compliance Schedule Activity Due Date Achieved Date

CROSS CONNECTION SURVEY REPORT 3/1/2019

	Wa	ater System Facili	ty and Sampling P	oint Ir	iventoi	ry			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10395	WELL	2	WFII	Δ					

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATE	n: SMALL WATER SYSTEM			
Operator Name	Operator Type	Certification(s)	Expiration	
ROWLEY, BRENDAN	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2019	
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2019	

				Contact Inf	ormation					
Name				Organization	า		Job Title			
Ms. Jessi Christians	en			Independen	Independent Day School			Head of School		
Mailing Address Lin	e One		Mailing Ad	dress Line Two		City State			Zip Code	
115 Laurel Brook Ro	oad					Middlefield CT 06455			06455	
Business Phone	Extension	Fax	1	Mobile Phone	Emergency Phone	Email Ad	ddress			
860-347-7235		860-347-8	8852			christiar	christiansen@independentdayschool.org			
Contact Role(s): A	dministrativa	Contact Lea	al Contact							

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0820392	MEMORIAL MIDDLE SCHOOL				NTNC	359	L	GW
Local Address (where applicable) Service Reside		Residen	itial	Commercia	al Industri	al Combine	ed Agricultural	
124 HUBBARD S	TREET	Connections	1					

Towns Served: MIDDLEFIELD			
Monitoria	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
· ·	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut D	epartment of	Public Health	Drinki	ng W	ater S	ection	
	Water	Quality Monit	oring and Com	plianc	e Sch	edule		
PWS ID	PWS Name			 Classificati	on Popu	ulation Ov	vner Type Pi	rimary Sour
СТ082039	2 MEMORIAL MIDDLE S	CHOOL		NTNC	3	359	L	GW
Local Add	ress (where applicable)		Service Resident	ial Comm	ercial I	ndustrial	Combined	Agricultur
24 HUBB	ARD STREET		Connections 1					
owns Ser	rved: MIDDLEFIELD							
		Monito	oring Requiremen	nts				
Water Sy	stem Facility: ENTRY POI	NT (WSF ID: 00700)						
Organic	Chemicals (VOCS)					1	routine (R	T) per yea
Samp	pling Point (Sampling Point IL	o)	Monitorin	g Period	Collect	tion Period	d Compli	ance Status
ENTR	RY POINT (3)		1/1/18 - 1	.2/31/18			Co	mplete
			1/1/19 - 1	.2/31/19				
			1/1/20 - 1	.2/31/20				
		Other Co	ompliance Sched	ules				
Complian	ce Schedule Activity		D	ue Date		Achieved	l Date	
CROSS CO	NNECTION SURVEY REPORT		3	/1/2020				
	Wat	er System Facili	ty and Sampling	Point In	vento	ry		
Water					Total	Lead and	d	
System	Water System Facility	Sampling Point			Coliform			Stag
Facility ID		ID	Description	Status	Rule	Rule Tie	r Asbestos	WQP 2 DBI
00201	ATM STORAGE #1							
00202	ATM STORAGE #2							
00302	TRANSFER PUMPS							
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		MEMSCH001	KITCHEN SINK 1	Α	Υ	2	Υ	
		MEMSCH002	KITCHEN SINK 2	Α	Υ	2	Υ	
		MEMSCH003	KITCHEN SINK 3	Α	Υ	2	Υ	
		MEMSCH004	KITCHEN SINK 4	Α	Υ	2	Υ	
		MEMSCH005	BOYS BATHROOM	Α	Υ	2	Υ	
		MEMSCH006	GIRLS BATHROOM	Α	Υ	2	Υ	
		MEMSCH007	LOCKER RM	Α	Υ	2	Υ	
		MEMSCH008	TEACHER LOUNGE	Α	Υ	2	Υ	
		MEMSCH009	SCIENCE ROOM	Α	Υ	2	Υ	
		MEMSCH010	NURSES OFFICE	Α	Υ	2	Υ	
		MEMSCH011	ART ROOM	Α	Υ	2	Υ	
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				

Facility Classification:SMALL WATER SYSTEMCertificationOperator NameOperator TypeCertification(s)ExpirationSUITER, CARLCHIEF OPERATORDISTRIBUTION SYSTEM OPERATOR - CLASS II12/31/2019WATER TREATMENT PLANT OPERATOR - CLASS II12/31/2021

Certified Operator Information

WELL #5

10405

WELL #5

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

				1				
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
СТ0820392	MEMORIAL MIDDLE SCHOOL				NTNC	359	L	GW
Local Address (v	where applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
124 HUBBARD S	TREET	Connections	1					

			С	ontact Info	ormation				
Name				Organization				Job Title	
Dr. Kathryn Y. Verd	nesi			Regional Sch	ool District #13		Superinten	dent	
Mailing Address Lin	e One		Mailing Add	ress Line Two			City	State	Zip Code
135A Pickett Lane						Durham		СТ	06424
Business Phone	Extension	Fax	М	obile Phone	Emergency Phone	Email Address			
860-349-7200		860-349-	7203		860-849-3464	kveronesi@rsd13.org			
Contact Role(s): A	dministrative	Contact, Leg	al Contact						

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source		
CT0829013	JOHN LYMAN SCHOOL	OHN LYMAN SCHOOL NTNC 285 L GW								
Local Address (where applicable)	Service	Residen	tial Commerci		al Industria	al Combine	ed Agricultural		

Connections

1

106 WAY ROAD

Towns Served: MIDDLEFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)			ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT - WELLS 1 & 3 (WSF ID): 00700)		
Inorganic Chemicals (IOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

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Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
СТ0829013	JOHN LYMAN SCHOOL				NTNC	285	L	GW
Local Address (where applicable)	Service	Residen	tial	Commerci	al Industri	al Combine	ed Agricultural
106 WAY ROAD		Connections	1					

Towns Served: MIDDLEFIELD

Other	Comp	liance	Sc	hed	lul	es
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Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2020	

	Wate	r System Facili	ity and Sampling P	oint Ir	nvento	ry		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	tage DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	А	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		JOHNLY001	KITCHEN SINK	Α	Υ	2	Υ	
		JOHNLY002	BOYS BATHROOM	Α	Υ	2	Υ	
		JOHNLY003	GIRLS BATHROOM	Α	Υ	2	Υ	
		JOHNLY004	ART ROOM	Α	Υ	2	Υ	
		JOHNLY005	NURSES OFFICE	Α	Υ	2	Υ	
		JOHNLY006	MEDIA HALLWAY	Α	Υ			
		JOHNLY007	ROOM 2B	Α	Υ			
		JOHNLY008	MEDIA BOYS	Α	Υ			
		JOHNLY009	PORTABLE #1	Α	Υ			
		JOHNLY010	PORTABLE #4	Α	Υ			
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT - WELLS 1 & 3	3	ENTRY POINT	А				
10397	WELL #1	2	WELL 1	А				
58015	WELL #3	2	WELL 3	Α				
58022	PUMP STATION							
58024	BLADDER TANKS							
ST01	ATMOSPHERIC TANK 1							
ST02	ATMOSPHERIC TANK 2							

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL V	VATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
SUITER, CARL	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	12/31/2019
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2021

Contact Information										
Name				Organization	1		Job Title			
Dr. Kathryn Y. Veronesi				Regional Sch	ool District #13	Superintendent				
Mailing Address Lin	e One		Mailing A	Address Line Two			City	State	Zip Code	
135A Pickett Lane						Durham		СТ	06424	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
860-349-7200		860-349-7	7203		860-849-3464	kverone	si@rsd13.org			

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Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule				
Water Quality Monitoring and Con	npliance S	Schedul	e	
PWS Name	Classification	Population	Owner Type	Prim

PWS ID PWS Name Cla			Cla	ssification	Population	Owner Type	Primary Source	
СТ0829013	T0829013 JOHN LYMAN SCHOOL					285	L	GW
Local Address (where applicable)		Service	Resider	itial	Commercia	al Industri	al Combin	ed Agricultural
106 WAY ROAD		Connections	1					

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name (Cla	ssification	Population	Owner Type	Primary Source	
CT0829023 LYMAN ORCHARD COUNTRY FARMS COMPLEX					NTNC	84	Р	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
32 REEDS GAP R	OAD	Connections	6					4

Towns Served: MIDDLEFIELD			
Monitorine	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24	_	_
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
· /	, , , , - , -		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name			Cla	ssification	Population	Ov	wner Type	Primary Source	
CT0829023	T0829023 LYMAN ORCHARD COUNTRY FARMS COMPLEX					84		Р	GW
Local Address (w	where applicable)	Service	Resider	ntial	Commerci	al Indust	rial	Combine	d Agricultur
32 REEDS GAP R	OAD	Connections	6						4

Towns Served: MIDDLEFIELD

Monitoring Requirements								
Water System Facility: ENTRY POINT (WSF ID: 00700)								
Organic Chemicals (VOCS)		1 rc	outine (RT) per year					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status					
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete					
	1/1/19 - 12/31/19							
	1/1/20 - 12/31/20							

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2024	

	Water 9	System Facili	ty and Sampling P	oint Ir	vento	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		MW001	MENS ROOM	Α	Υ			
		MW002	LADIES ROOM	Α	Υ	2		
		MW004	PRODUCE SINK	Α	Υ			
		MW004-B	BAKERY SINK	Α	Υ	2		
		MW004-D	DELI SINK	Α	Υ	2		
		MW004-PRO	PRODUCE SINK	Α	Υ	2		
		MW01	MENS ROOM	Α	Υ	2	Υ	
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10398	WELL #4 (GOLF MAINTENANCE BLDG)	2	WELL #4	Α				
10399	WELL #3 (SOUTH WELL)	2	WELL #3	Α				
10763	WELL #5 (CLUB HOUSE)	2	WELL #5	Α				
59358	BLADDER TANKS (CLUB HOUSE)							
59360	HYDROPNEUMATIC TANK (SOUTH WELL)							
59362	HYDROPNEUMATIC TANK (GOLF MAINTENANCE)							

MAINTENANCE)								
Certified Operator Information								
Water System Facility: DIST	TRIBUTION SYSTEM (WSF ID: 0060	00)						
Facility Classification: SMALL \	WATER SYSTEM		Certification					
Operator Name	Operator Type	Certification(s)	Expiration					
BRAIG, ALLEN L.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2019					
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	12/31/2021					

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	<u> </u>							
PWS ID	PWS ID PWS Name C				ssification	Population	Owner Type	Primary Source
CT0829023	LYMAN ORCHARD COUNTRY FARMS COMPL		NTNC	84	Р	GW		
Local Address (v	where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
32 REEDS GAP F	ROAD	Connections	6					4

			Organization	-					
		Name				Job Title			
			Lyman Orcha	Owner					
One		Mailing A	Mailing Address Line Two			City	State	Zip Code	
					Middlefield		СТ	06455	
Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
6001	203-349-2	1424			JLYMAN3@LYMANORCHARDS.COM				
	xtension	xtension Fax	xtension Fax	xtension Fax Mobile Phone	xtension Fax Mobile Phone Emergency Phone	Middlefic xtension Fax Mobile Phone Emergency Phone Email Ad	Middlefield xtension Fax Mobile Phone Emergency Phone Email Address	Middlefield CT xtension Fax Mobile Phone Emergency Phone Email Address	

Contact Role(s): Administrative Contact, Legal Contact, Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C			Cla	ssification	Population	Owner Type	Primary Source	
CT0829084	6 WAY ROAD				NTNC	78	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
6 WAY ROAD		Connections	1		1			

Towns Served: MIDDLEFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19	1/1-12/31	Waiver
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Schedule Generation Date: 4/11/2019

	Connecticut I	Departmen	t of	Public I	Health	Dri	nkin	g Wa	ater S	ection	
		Quality Mo						0			
PWS ID	PWS Name	Quality 1410	, III C	oring an	u dom					wner Type Pr	imary Source
CT0829084							TNC		'8	Р	GW
Local Addr	ess (where applicable)			Service	Residen	tial Co	ommer	cial In	dustrial	Combined	Agricultural
6 WAY RO				Connections	1		1				
Towns Serv	ved: MIDDLEFIELD										
		Mo	onito	oring Req	uireme	nts					
Water Sys	stem Facility: ENTRY PO	INT (WSF ID: 00	700)								
Organic (Chemicals (VOCS)									1 routine (R	T) per year
Samp	ling Point (Sampling Point I	D)			Monitori	ng Peri	iod	Collect	ion Perio	d Compli	ance Status
					1/1/19 -	12/31/	/19				
					1/1/20 -	12/31/	/20				
Water Sys	stem Facility: WELL 1 (V	VSF ID: 59452)									
E. Coli (3	014)								1 rc	outine (RT) ¡	er quarter
Samp	ling Point (Sampling Point I	D)			Monitori	ng Peri	iod	Collect	ion Perio	d Compli	ance Status
WELL	1 (2)				10/1/18 -	12/31	/18			Co	mplete
					1/1/19 -	3/31/2	19			Co	mplete
					4/1/19 -						
					7/1/19 -	9/30/2	19				
		Oth	er Co	ompliance	e Sched	lules					
Complianc	e Schedule Activity					Due Da			Achieve	d Date	
	AD CONSUMER NOTICE CER		9/28/2015			015					
	AD CONSUMER NOTICE CER	TIFICATE	12/29/2018								
CROSS CO	NECTION SURVEY REPORT					3/1/20					
		Public	Not	ification I	Require	men	ts				
			Co	ompliance	Notice	' !	<u>Public</u>	<u>Notifica</u>	<u>rtion</u>	<u>PN Cert</u>	<u>ification</u>
Violation/				Period	Tier		equire		formed	Due to DPH	Received
Lead and C	opper M&R Violation			16 - 6/30/16	3		27/201			10/7/2017	
	Wa	ter System F	acili	ty and Sa	mpling	Poin	it Inv	ento	ſy		
Water								Total	Lead an		
System	Water System Facility		Point	Sampling Po	int		C	oliform	Coppe		Stage
Facility ID	DICTRIBUTION CVCTEM	ID		Description	NI CVCTERA		<u>atus</u>	Rule	Rule I I	er Aspestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4 504/45TF		DISTRIBUTIO			A				
				WITHIN 5 SE			A				
00700	ENTRY DOINT	UPSTRE/	AIVI	WITHIN 5 SE			Α				
	ENTRY POINT	3		ENTRY POIN	I		A				
	WELL 1	2		WELL 1			Α				
59642	BLADDER TANK										
		Certif	ied	Operator	Inform	atio	n				

Certified Operator Information									
Water System Facility:	DISTRIBUTION SYSTEM (WSF ID: 0060	00)							
Facility Classification: SN	AALL WATER SYSTEM		Certification						
Operator Name	Operator Type	Certification(s)	Expiration						
SIMA, III, JOHN F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2020						
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2020						

	Water Quality M	lonitoring and	d Con	npl	iance S	chedul	e	
PWS ID PWS Name					ssification	Population	Owner Type	Primary Source
CT0829084 6 WAY ROAD					NTNC	78	Р	GW
Local Address (v	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural	
6 WAY ROAD	Connections	1		1				

Connecticut Department of Public Health Drinking Water Section

Towns Serveu. Milb	DEEFIELD									
				Contact Infe	ormation					
Name				Organization		Job Title				
Mr. Mickey Fowler										
Mailing Address Line One Mailing Address				ddress Line Two			City	State	Zip Code	
6 Way Road					Middlefi	eld	CT	06455		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	y Phone Email Address				
860-349-7017 860-349-7032 860			860-966-7487	860-789-6385	mickey@execoff.com					
Contact Role(s): Ac	dministrative	Contact, Leg	al Contact	, Owner						
Name				Organization			Job Title			
Mr. Lester Fowler				The 6 Way R	oad Venture		Executive Offic	er		
Mailing Address Line	e One		Mailing A	ddress Line Two		City		State	Zip Code	
6 Way Road					Middlefield		CT	06455		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress			
860-349-7017 860-349-7032				860-759-6385	mickey@execoff.com					
Contact Role(s): O	wner		,							

Please note the following:

Towns Served: MIDDLEFIELD

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule